77 - CO 274 N 424

								Application or Docket Number					
1	PATENT APPLICATION FEE DETERMINATION RECO Efféctive October 1, 2003								10/809034				
CLAIMS AS FILED - PART I (Column 1) (Column								SMALL TYPE	ENTITY	OR	OTHER	THAN ENTITY	
Ti	OTAL CLAIM	S	16					RATE	FEE	7	RATE	FEE	
F	OR ·		NUMBER FILED		NUMBER EXTRA			BASIC F	E€ 385.00		BASIC FEE	770.00	
1	OTAL CHARGE	ABLE CLAIMS	/6 minus 20=					\ <u>\</u>	-	┧,,,		·.	
	<del></del> -					•		X\$ 9=	<b></b>	JOR.	·X\$18≔		
⊩	DEPENDENT C	NOENT CLAIM P	<u> </u>	inus 3 =	L			X43=		OR	X86=		
L	OCTIFICE DEFE	MOGAL COVINE	resent U			١. ا	+145=	1	ОR	+290=			
۱۰۱	* If the difference in column 1 is less than zero, enter "0" in column 2								385	OR	TOTAL		
	CLAIMS AS AMENDED - PART II										OTHER	THAN	
16	6-06		SMALL	ENTITY	OR .	SMALL	ENTITY .						
AMENDMENT A		CLAIMS . REMAINING AFTER AMENDMENT		HIGH HUME PREVIO PAID !	BER	PRESENT EXTRA		RATE	ADS1- TIPNAL REE		PATE:	. ADDI- TIONAL FEE	
Ş	Total	: 16	Minus	- 2	20	.65		X\$ 9=		OFI	X\$18=		
E E	Independent	. 3	Minus	•••	3	- 65		X43=	17	OR	X86=	. •	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		1	+290=		
١,										OR	TOTAL		
	(Column 2) (Column 3)							TOTAL COST. FEE		JOR ,	ADDIT. FEE	<u> </u>	
+4	<del>                                      </del>	ء ا		1/221	, ,								
ENT B	ans	CLAIMS REMAINING AFTER AMENDHENT		HIGHE NUMB PREVIO PAID,F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE	
AMENOMENT	Total .	- /1/	Minus	- /	0	• /		XXX	17	OR	X\$18=		
AME	Independent	. 3	Minus	in	<u>3</u> _	9/		X43=	1	OR	X86=		
L	FIRST PRESE	NTATION OF M	ILTIPLE DEI	PENDENT	CLAIM			+145=		OR	+290=	· ·	
<del>.</del>									12	OB	TOTAL	<del>`</del> -	
	5-10-07		A	DOIT. FEE	<u> </u>	10" /	VODIT. FEEL						
<u></u>	· · ·	(Culumn 1)		(Colum HIGHE		(Column 3)			· ·	_			
ENT C		REMAINING AFTER AMENDMENT		PAIO I	ER JSLY	PRESENT EXIRA		PATE	ADDI- TIONAL IFEE		RATE	ADDI- TIONAL FEE	
ĘO W	Total '	. 15	Minus	- 20		<u> </u>	-	×\$\(\partial_{\tau}\)	7	OR	X\$18±		
AMENOMEN	Independent	. 3	Minus		3	,	-	X43-	/I	1	X8G=		
	FIRST PRESE	TW 10 MOLLVLA	LTIPLE DEP	GINDEINT (	CLVIM		-	X	<u> </u>	OF -	~~~		
+145/ OH +290=													
iI	If the entry is column 1 is test than the entry in column 2, write 'Q' is column 3  "If the Trightest Epimater Proviously Paid For the THIS SPACE is less than 20, enter "20"  ANDIT FEE												
		ntion Previously Paid har Proviously Paid					f. m .s.u.	l as die app	nalação poc	o, colu	14 <b>1</b> )	- 1	